

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>Dr</i>	<i>32</i>	<i>5/23</i>
FORMALITY REVIEW		<i>555</i>	<i>6/23/01</i>
RESPONSE FORMALITY REVIEW	<i>am</i>	<i>581</i>	<i>27-12-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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*10/28/01*  
*1/2/02*  
*1/2/02*